## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	· ID NO.	DATE		
FEE DETERMINATION	ST		3-15-00		
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FORMALITY REVIEW		1/1×14/77	5-11.00		
RESPONSE FORMALITY REVIEW		app	9.8.00		

## **INDEX OF CLAIMS**

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If more than 150 claims or 10 actions staple additional sheet here